

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | BT       |        | 11-9-99  |
| O.I.P.E. CLASSIFIER |          | 49     | 11/15/99 |
| FORMALITY REVIEW    |          | 100000 | 11-30    |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) Canceled      A ..... Appeal  
 : ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 1-25-02  |
| 2        | 11-20-02 |
| 3        | 5-5-23   |
| 4        | 7-6-02   |
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| Claim    | Date |
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| Claim    | Date |
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| Final    |      |
| Original |      |
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If more than 150 claims or 10 actions  
staple additional sheet here

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